

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of	)	Examiner: Unknown
Theodore A. RESNICK	)	Art Unit: Unknown
	)	
Serial No.: not assigned	)	
	)	
Filed: herewith	)	
	)	
Title: High Speed Modulation of Switched-	)	
Focus X-Ray Tube	)	
	)	
Attorney Docket No.: PHUS030005US	)	Cleveland, Ohio 44143
		July 6, 2005

## Information Disclosure Statement under 37 CFR 1.97(b)(3)

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Further to the filing of the National Stage Entry of PCT patent application, serial number PCT/IB2004/000007, Applicant submits an Information Disclosure Statement under 37 CFR 1.97(b)(3). Along with the article reference, Applicant also encloses a form PTO/ISB/08A listing all of the references for the Examiner's convenience.

Applicant believes that no charge is due for the submission of this Information Disclosure Statement. However, please charge any necessary fees in connection with this submission to our Deposit Account No. 14-1270.

Respectfully submitted,



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Substitute for form 1449/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

**(Use as many sheets as necessary)**

**Complete if Known**

Application Number	unknown	10/541563
Filing Date	herewith	
First Named Inventor	Theodore Resnick	
Art Unit	unknown	
Examiner Name	unknown	
Attorney Docket Number	PHUS030005US	

Sheet	1	of	2
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## U. S. PATENT DOCUMENTS

[illegible]

## FOREIGN PATENT DOCUMENTS

[illegible]

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(Use as many sheets as necessary)</i>				<b>Complete if Known</b>	
				Application Number	unknown <b>10/541563</b>
				Filing Date	herewith
				First Named Inventor	Theodore Resnick
				Art Unit	unknown
				Examiner Name	unknown
Sheet	2	of	2	Attorney Docket Number	PHUS030005US

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
		Varian Medical Systems; X-Ray Products GS1596; CT Scanner X-Ray Tube; 5012; Rev. 1; April, 2000; 6 pp.	

Examiner Signature		Date Considered	
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<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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